

Fill in this information to identify the case:

Debtor name Van Scoit AM Restaurants LLC

United States Bankruptcy Court for the:

Northern District of Texas

Case number (if known): 25-40643

☐ Check if this is an amended filing

## Official Form 207

# Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

### Part 1: Income

#### 1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

#### Sources of revenue

Check all that apply

#### Gross revenue

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2025 to Filing date  
MM/ DD/ YYYY

☒ Operating a business

☐ Other \_\_\_\_\_

\$94,878.33

For prior year:

From 01/01/2024 to 12/31/2024  
MM/ DD/ YYYY MM/ DD/ YYYY

☒ Operating a business

☐ Other \_\_\_\_\_

\$2,506,432.38

For the year before that:

From 01/01/2023 to 12/31/2023  
MM/ DD/ YYYY MM/ DD/ YYYY

☒ Operating a business

☐ Other \_\_\_\_\_

\$2,552,723.72

#### 2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

#### Description of sources of revenue

#### Gross revenue from each source

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2025 to Filing date  
MM/ DD/ YYYY

For prior year:

From 01/01/2024 to 12/31/2024  
MM/ DD/ YYYY MM/ DD/ YYYY

For the year before that:

From 01/01/2023 to 12/31/2023  
MM/ DD/ YYYY MM/ DD/ YYYY

**Part 2:** List Certain Transfers Made Before Filing for Bankruptcy**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

	Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer Check all that apply
3.1.	<b>Rapid Finance</b> Creditor's name <b>4500 East West Highway 6th Floor</b> Street  <b>Bethesda, MD 20814</b> City State ZIP Code		<b>\$28,461.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b>MCA</b>
3.2.	<b>Newtek</b> Creditor's name <b>212 West 35111 Street, 2nd Floor</b> Street  <b>New York, NY 10001</b> City State ZIP Code		<b>\$14,600.00</b>	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other
3.3.	<b>Kapitus</b> Creditor's name <b>2500 Wilson Boulevard, Suite 350</b> Street  <b>Arlington, VA 22201</b> City State ZIP Code		<b>\$6,888.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b>MCA</b>
3.4.	<b>NCR Voyix Corporation</b> Creditor's name <b>864 Spring St. NW</b> Street  <b>Atlanta, GA 30308-1007</b> City State ZIP Code		<b>\$9,865.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other
3.5.	<b>See Attached</b> Creditor's name  Street  City State ZIP Code		<b>See Attached</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. _____ Creditor's name	_____	_____	_____
_____	_____		_____
_____	_____		_____
_____			
City State ZIP Code			
Relationship to debtor			
_____			

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Description of the property	Date	Value of property
5.1. _____ Creditor's name	_____	_____	_____
_____			
_____			
_____			
City State ZIP Code			

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
6.1. _____ Creditor's name	_____	_____	_____
_____	XXXX- _ _ _ _		
_____			
_____			
City State ZIP Code			

Name

**Part 3:** Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None

7.1.	Case title	Nature of case	Court or agency's name and address	Status of case
			Name	<input type="checkbox"/> Pending
			Street	<input type="checkbox"/> On appeal
				<input type="checkbox"/> Concluded
			City State ZIP Code	

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

8.1.	Custodian's name and address	Description of the property	Value
	Custodian's name		
	Street		
	City State ZIP Code		
		Case title	Court name and address
			Name
		Case number	Street
		Date of order or assignment	City State ZIP Code

**Part 4:** Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☒ None

9.1.	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
	Recipient's name			
	Street			
	City State ZIP Code			
	Recipient's relationship to debtor			

Name

**Part 5:** Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred

Amount of payments received for the loss

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (*Schedule A/B: Assets – Real and Personal Property*).

Date of loss

Value of property lost

10.1.

**Part 6:** Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

11.1.

Who was paid or who received the transfer?

If not money, describe any property transferred

Dates

Total amount or value

**DeMarco Mitchell, PLLC****Attorney's Fee****2/8/2025****\$6,000.00**

Address

**12770 Coit Road, Suite 850**

Street

**Dallas, TX 75251**

City State ZIP Code

Email or website address

**robert@demarcomitchell.com**

Who made the payment, if not debtor?

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

12.1.

Name of trust or device

Describe any property transferred

Dates transfers were made

Total amount or value

Trustee

**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

13.1.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	<div>Address</div> <div>Street</div> <div>CityStateZIP Code</div> <div>Relationship to debtor</div>			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

14.1.	Address	Dates of occupancy
	<div>Street</div> <div>CityStateZIP Code</div>	From To

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:  
—diagnosing or treating injury, deformity, or disease, or  
—providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Name

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.1.

Facility name

Street

City State ZIP Code

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

☐ Electronically☐ Paper**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**☒ No.☐ Yes. State the nature of the information collected and retained. \_\_\_\_\_

Does the debtor have a privacy policy about that information?

☐ No☐ Yes**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☒ No. Go to Part 10.☐ Yes. Does the debtor serve as plan administrator?☐ No. Go to Part 10.☐ Yes. Fill in below:

Name of plan

Employer identification number of the plan

EIN: \_ \_ - \_ \_ \_ \_ \_

Has the plan been terminated?

☐ No☐ Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial institution name and address

Last 4 digits of account number

Type of account

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

18.1

Name

Street

City State ZIP Code

XXXX- \_ \_ \_ \_

☐ Checking☐ Savings☐ Money market☐ Brokerage☐ Other

Name

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

19.1	Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Name			<input type="checkbox"/> No
	Street			<input type="checkbox"/> Yes
		Address		
	City State ZIP Code			

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

20.1	Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	<b>Public Storage</b>		Misc. Rest. Equipment	<input checked="" type="checkbox"/> No
	Name			<input type="checkbox"/> Yes
	<b>8850 Trinity Blvd.</b>			
	Street			
		Address		
	<b>Hurst, TX 76053</b>			
	City State ZIP Code			

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name			
Street			
City State ZIP Code			

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- **Environmental law** means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- **Site** means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.



Hazardous material

means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
- ☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
	Name		<input type="checkbox"/> Pending
Case number	Street		<input type="checkbox"/> On appeal
			<input type="checkbox"/> Concluded
	City State ZIP Code		

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

Part 13: Details About the Debtor’s Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Debtor **Van Scoit AM Restaurants LLC**Case number (if known) **25-40643**

Name

Business name and address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

25.1. \_\_\_\_\_  
Name \_\_\_\_\_  
\_\_\_\_\_  
Street \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
City State ZIP Code

EIN: \_ \_ - \_ \_ - \_ \_

Dates business existed

From \_\_\_\_\_ To \_\_\_\_\_

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address

Dates of service

26a.1. **Denke & Denke CPA** \_\_\_\_\_  
Name \_\_\_\_\_  
From **2011** To \_\_\_\_\_  
**5600 Clearfork Main St** \_\_\_\_\_  
Street \_\_\_\_\_  
\_\_\_\_\_  
**Fort Worth, TX 76109** \_\_\_\_\_  
City State ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

Name and address

Dates of service

26b.1. \_\_\_\_\_  
Name \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_  
\_\_\_\_\_  
Street \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
City State ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address

If any books of account and records are unavailable, explain why

26c.1. **Denke & Denke CPA** \_\_\_\_\_  
Name \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_  
**5600 Clearfork Main St** \_\_\_\_\_  
Street \_\_\_\_\_  
\_\_\_\_\_  
**Fort Worth, TX 76109** \_\_\_\_\_  
City State ZIP Code

Name

**Name and address****If any books of account and records are unavailable, explain why**

26c.2.

**Julio C. Van Scoit**

Name

**8820 Trinity Vista Trl**

Street

**76053**

City

State

ZIP Code

26d.

List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address**

26d.1.

Name

Street

City

State

ZIP Code

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory****Name and address of the person who has possession of inventory records**

27.1.

Name

Street

City

State

ZIP Code

**28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

Name	Address	Position and nature of any interest	% of interest, if any
<b>Julio C. Van Scoit</b>	<b>8820 Trinity Vista Trl Hurst, TX 76053</b>	<b>Managing Member,</b>	<b>49.00%</b>
<b>Valerie D. Van Scoit</b>	<b>8820 Trinity Vista Trl Hurst, TX 76053</b>	<b>Member,</b>	<b>51.00%</b>

**29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?**☒ No☐ Yes. Identify below.

Name

Name	Address	Position and nature of any interest	Period during which position or interest was held
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\_\_\_\_\_ , \_\_\_\_\_  
 From \_\_\_\_\_  
 To \_\_\_\_\_

**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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30.1. **Van Scoit, Julio** **\$14,827.79** **Salary**  
 Name \_\_\_\_\_

**8820 Trinity Vista Trl**

Street

**Hurst, TX 76053**

City

State

ZIP Code

Relationship to debtor

**31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**☒ No☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: \_ \_ - \_ \_ \_ \_ \_

**32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**☒ No☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: \_ \_ - \_ \_ \_ \_ \_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **03/11/2025**  
 MM/ DD/ YYYY

**X** **/s/ Julio Van Scoit**  
 Signature of individual signing on behalf of the debtor

Printed name **Julio Van Scoit**

Debtor **Van Scoit AM Restaurants LLC**

Case number (if known) **25-40643**

Name

Position or relationship to debtor **Managing Member**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

Van Scoit AM Restaurants LLC  
Expenses by Vendor Summary  
December 2024 through February 2025

Cash Basis	Dec 2024 - Feb 2025
6237 Rufe Snow LLC	13,000.00
AD Pages	0.00
ATMOS	1,169.90
Ben E. Keith	83,842.77
City of Watauga	0.00
Coca-Cola North America	0.00
Decision Logic	768.26
Direct Source Hamco	14.87
Delancey Street	6,000.00
DoorDash	
First Data	3,930.76
Freedom Pay	131.54
Fox Funding Group	68,000.00
GIVEX	43.45
HME	0.00
Massey	1,311.14
North Mill Equipment	2,845.60
NCR CORPORATION	1,245.60
Newtek Bank	0.00
NuArx Inc.	0.00
NuCO2	0.00
Olo Inc	1,408.37
Parkside Center LLC	12,000.00
PNC Bank	3,611.50
Rapid Finance	39,846.10
Raven Electrical	0.00
Reliant Metro LLC	361.75
SCCS	0.00
Schlotzsky's	3,036.63
Schlotzsky's-NAMF	11,681.33
Schlotzsky's-Royalty	17,132.00
Shreeji3801 Inc.	0.00
Spectrum	1,515.89
Summer Energy	8,697.52
TCR Heating and Air	0.00
Trimble Grease Trap	0.00
Westbrooke Capital Ltd.	0.00
UberEats	0.00
TOTAL	268,594.98